

**SPILL MANAGEMENT TEAM/TABLETOP
EXERCISE REPORT- FG OSPR 1966**

1. Date of drill:

2. Location of Drill/Exercise or actual response:

3. Spill Management team used (check one):

- ☐ 1. Local response spill management team.
- ☐ 2. Dedicated Company spill management team.
- ☐ 3. Professional spill Management Service (name of the spill management service used)

4. Time started:

Time completed:

5. Response plan scenario used (check one):

- ☐ Most probable discharge:
 - ☐ Maximum most probable discharge:
 - ☐ Reasonable worst case discharge:
 - ☐ Worst case discharge
- Size of (simulated) spill (bbls/gals):

6. Describe how the following objectives were exercised:

a) Spill management team's knowledge of oil-spill response plan:

b) Proper notifications:

c) Communications system:

d) Spill management team's ability to access contracted oil spill removal organizations.

e) Spill management team's ability to coordinate spill response with On-Scene Coordinator, state and applicable agencies:

f) Spill management team's ability to access sensitive site and resource information in the Area Contingency Plan:

7. Attach description of lesson(s) learned and person(s) responsible for follow up of corrective measures.

Evaluators:

Signature: Date

Signature: Date

Signature: Date

Signature: Date

Retain this form for a minimum of 3 years (for USCG/RSPA/MMS) or 5 years (for EPA).

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Questions or comments regarding the Drills and Exercises Program can be directed to either

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